

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Department
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN
DATE RECEIVED
OCT 25 2017

Bayfield Co. Zoning Dept.

ENTERED

| | |
|--------------|------------------|
| Permit #: | 1700101 |
| Date: | 10/25/17 H-27-17 |
| Amount Paid: | \$500.00-17 |
| Refund: | |

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

| | | | | | | | | |
|--|--|-----------------------------------|--|--------------------------------|--|---|--|--------------------------------|
| TYPE OF PERMIT REQUESTED → | | <input type="checkbox"/> LAND USE | <input type="checkbox"/> SANITARY | <input type="checkbox"/> PRIVY | <input type="checkbox"/> CONDITIONAL USE | <input type="checkbox"/> SPECIAL USE | <input type="checkbox"/> B.O.A. | <input type="checkbox"/> OTHER |
| Owner's Name: | Sally Stinac | | Mailing Address: | 81755 Sec 14 N 1/4 E 1/4 | | City/State/Zip: | Red 54850-2016 | |
| Address of Property: | Sally Stinac | | City/State/Zip: | 81755 Sec 14 N 1/4 E 1/4 | | Cell Phone: | 22 | |
| Contractor: | Sally Stinac | | Contractor Phone: | 507 480 2016 | | Plumber: | 0 | |
| Authorized Agent: (Person Signing Application on behalf of Owner(s)) | | | Agent Phone: | | | Agent Mailing Address (include City/State/Zip): | Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| PROJECT LOCATION | Legal Description: (Use Tax Statement) | Tax ID# | Recorded Document: (i.e. Property Ownership) | | | | | |
| SE 1/4, NE 1/4 | Gov't Lot | Lot(s) | CSM | Vol & Page | Lot(s) No. | Block(s) No. | Subdivision: | |
| Section 3 | Township 49 N, Range 9 W | Town of: | | Orienta | | Lot Size | Acreage | |

| | | | | |
|---|---|--|---|---|
| <input type="checkbox"/> Shoreland | <input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If Yes---continue → | Distance Structure is from Shoreline: _____ feet | <input type="checkbox"/> Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Are Wetlands Present? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input checked="" type="checkbox"/> Non-Shoreland | <input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes---continue → | Distance Structure is from Shoreline: _____ feet | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| | | | | | | |
|--|--|---|--|---|---|---|
| Value at Time of Completion * include donated time & material | Project | # of Stories | Foundation | # of bedrooms in structure | What Type of Sewer/Sanitary System Is on the property? | Type of Water on property |
| \$ 1500.00 | <input type="checkbox"/> New Construction <input type="checkbox"/> Addition/Alteration <input type="checkbox"/> Conversion <input type="checkbox"/> Relocate (existing bldg) <input type="checkbox"/> Run a Business on Property | <input checked="" type="checkbox"/> 1-Story <input type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story | <input type="checkbox"/> Basement <input type="checkbox"/> Foundation <input checked="" type="checkbox"/> 01 WALKS | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 | <input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary <input type="checkbox"/> Sanitary (Exists) Specify Type: _____ <input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input checked="" type="checkbox"/> Compost Toilet | <input type="checkbox"/> City <input type="checkbox"/> Well <input checked="" type="checkbox"/> 0 |
| | <input checked="" type="checkbox"/> Residential Use Rec'd for Issuance | with a Porch | | | | |
| | | with (2nd) Porch | | | | |
| | | with a Deck | | | | |
| | | with (2nd) Deck | | | | |
| | <input type="checkbox"/> Commercial Use Secretarial Staff | with Attached Garage | | | | |
| | | Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities | | | | |
| | | Mobile Home (manufactured date) | | | | |
| | <input type="checkbox"/> Municipal Use | Addition/Alteration (specify) | | | | |
| | | Accessory Building (specify) | | | | |
| | | Accessory Building Addition/Alteration (specify) | | | | |
| | | Special Use: (explain) | | | | |
| | | Conditional Use: (explain) | | | | |
| | | Other: (explain) | | | | |

| | | | |
|---|------------|-----------|------------|
| Existing Structure: (if permit being applied for is relevant to it) | Length: 33 | Width: 13 | Height: 13 |
| Proposed Construction: | Length: 33 | Width: 13 | Height: 13 |

| | | | | |
|--|---|---|---------------|----------------|
| Proposed Use | ✓ | Proposed Structure | Dimensions | Square Footage |
| <input checked="" type="checkbox"/> Residential Use Principal Structure (first structure on property) | | STORAGE ONLY | (33 x 13) | 429 |
| <input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.) | | PERGOLA | (11.6 x 17) | |
| <input checked="" type="checkbox"/> Residential Use Rec'd for Issuance | | with a Porch | (33 x 13) | |
| | | with (2nd) Porch | (33 x 13) | |
| | | with a Deck | (33 x 13) | |
| | | with (2nd) Deck | (33 x 13) | |
| <input type="checkbox"/> Commercial Use Secretarial Staff | | with Attached Garage | (33 x 13) | |
| | | Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities | (33 x 13) | |
| | | Mobile Home (manufactured date) | (33 x 13) | |
| | | Addition/Alteration (specify) | (33 x 13) | |
| | | Accessory Building (specify) | (33 x 13) | |
| | | Accessory Building Addition/Alteration (specify) | (33 x 13) | |
| | | Special Use: (explain) | (33 x 13) | |
| | | Conditional Use: (explain) | (33 x 13) | |
| | | Other: (explain) | (33 x 13) | |

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) and (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): _____ Date 10-25-2017

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: _____ Date _____

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

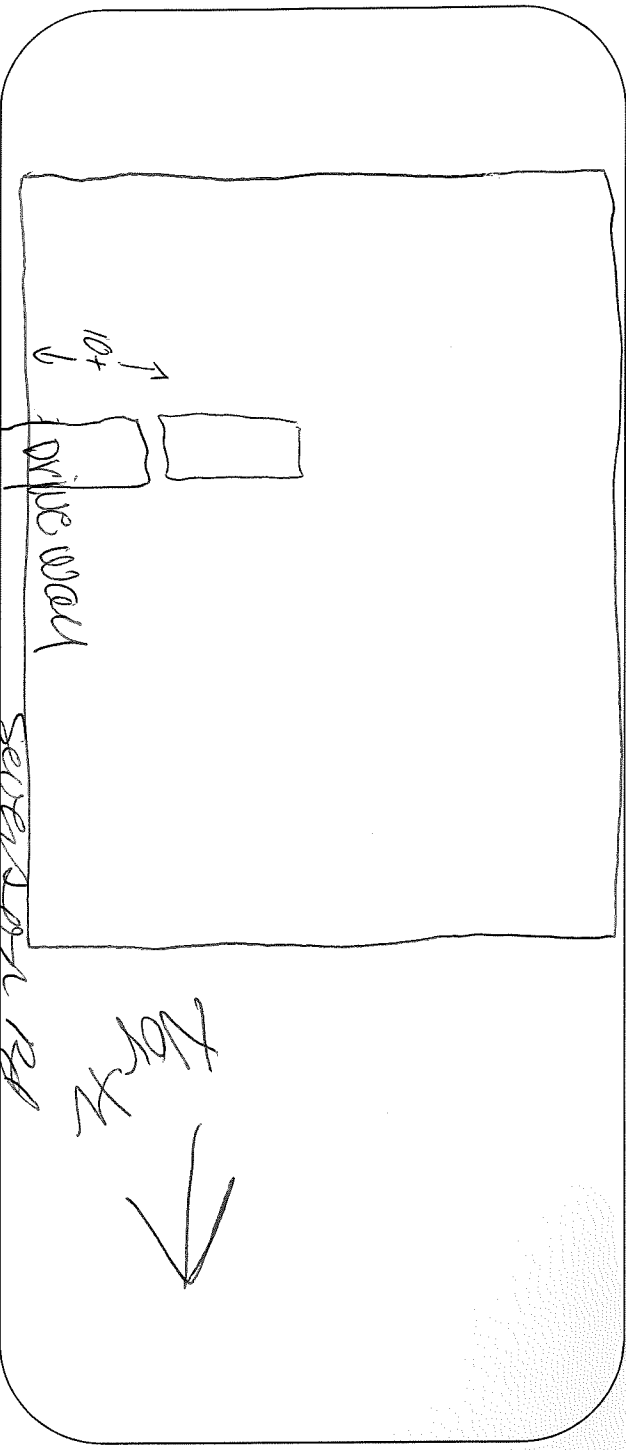
Address to send permit _____ Attach
Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Box below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: **Proposed Construction**
(2) Show / Indicate: North (N) on Plot Plan
(3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road)
(4) Show: All Existing Structures on your Property
(5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
(6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
(7) Show any (*): (*) Wetlands; or (*) Slopes over 20%



Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

| Description | Measurement | Description | Measurement |
|---|-------------|--|---|
| Setback from the Centerline of Platted Road | 603 Feet | Setback from the Lake (ordinary high-water mark) | N/A Feet |
| Setback from the Established Right-of-Way | 390 Feet | Setback from the River, Stream, Creek | N/A Feet |
| Setback from the North Lot Line | 3724 Feet | Setback from the Bank or Bluff | N/A Feet |
| Setback from the South Lot Line | 375 Feet | Setback from Wetland | N/A Yes <input type="checkbox"/> No <input type="checkbox"/> Feet |
| Setback from the West Lot Line | 4804 Feet | 20% Slope Area on the property | N/A Yes <input type="checkbox"/> No <input type="checkbox"/> Feet |
| Setback from the East Lot Line | 320 Feet | Elevation of Floodplain | N/A Feet |
| Setback to Septic Tank or Holding Tank | N/A Feet | Setback to Well | N/A Feet |
| Setback to Drain Field | N/A Feet | | |
| Setback to Privy (Portable, Composting) | Feet | | |

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain Field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

| | | | | | | | | |
|--|--|---|--|--|---|---|--------------------|---|
| Issuance Information (County Use Only) | | Sanitary Number: | # of bedrooms: | | Sanitary Date: | | | |
| Permit Denied (Date): | | Reason for Denial: | | | | | | |
| Permit #: 1700107 | | Permit Date: 11-07-17 | | | | | | |
| Is Parcel a Sub-Standard Lot | | <input type="checkbox"/> Yes (Deed of Record) | <input checked="" type="checkbox"/> No | Mitigation Required | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Affidavit Required | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Is Parcel in Common Ownership | | <input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) | <input checked="" type="checkbox"/> No | Mitigation Attached | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Affidavit Attached | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Is Structure Non-Conforming | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Previously Granted by Variance (B.O.A.) | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Case #: | | |
| Granted by Variance (B.O.A.) | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Case #: | | Case #: | | | |
| Was Parcel Legally Created | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Were Property Lines Represented by Owner | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Zoning District | | |
| Was Proposed Building Site Delineated | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Was Property Surveyed | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Lakes Classification | | |
| Inspection Record: OWNER INDICATES THE STRUCTURE IS FOR TEMPORARY STORAGE. THE STRUCTURE WILL BE DISASSEMBLING WITHIN A NEW BUILDING IS MOVED ONTO THE PROPERTY IN THE SPRING. | | Date of Re-Inspection: | | | | | | |
| Date of inspection: | | Inspected by: | | | | | | |
| Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No – (If No they need to be attached.) | | | | | | | | |
| Building shall not be used for human habitation or sleeping purposes. Building shall either be permitted or removed w/in 1 year from the date of this permit issuance. Building shall be | | | | | | | | |
| Signature of Inspector: | | Date of Approval: 11-27-17 | | | | | | |
| Hold For Sanitary: <input type="checkbox"/> _____ | | Hold For BA: <input type="checkbox"/> _____ | | Hold For Affidavit: <input type="checkbox"/> _____ | | Hold For Fees: <input type="checkbox"/> _____ | | |

located at least 75 ft ← from side + rear property line + 63' from center of seven rd.

wn, City, Village, State or Federal
permits May Also Be Required
TEMPORARY

LAND USE – X
SANITARY – None
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **17-0010T** Issued To: **Sally Stimac**

Par in
Location: **SE** $\frac{1}{4}$ of **NE** $\frac{1}{4}$ Section **3** Township **49** N. Range **9** W. Town of **Orienta**

Gov't Lot Lot Block Subdivision CSM#

For: **Residential Principal Structure: [Temporary permit allowing existing structure for a period of less than 1 year. 1 - Story, Storage (33' x 13') = 429 sq. ft.]**

Condition(s): Building shall not be used for human habitation or sleeping purposes. Building shall either be permitted or removed within 1 year from the date of this permit issuance. Building shall be located at least 75 feet from side and rear property line and 63 feet from center of **Severson Rd.**

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Jennifer Murphy

Authorized Issuing Official

November 27, 2017

Date